## Tina Loren Yoga

## Release/Wavier of Liability and Agreement

I, \_\_\_\_\_\_ (print name), understand that yoga includes physical movements and exertion which may be strenuous. As is the case with any physical activity, the risk of injury, even serious or disabling, is always present and cannot be entirely eliminated. If I experience any pain or discomfort, I will listen to my body, adjust the posture and ask for support from the teacher.

Yoga is not a substitute for medical attention, examination, diagnosis or treatment. Yoga is not recommended and is not safe under certain medical conditions. I affirm that I have been checked by my doctor and cleared to practice yoga prior to buying and participating in class / private lessons / workshops with Tina Loren Yoga.

I agree to assume full responsibility for any risks, injuries, damages or death, known or unknown, which I might incur as a result. I, my heirs or legal representatives, hereby agree to irrevocably release, waive, discharge and covenant negligence or other acts.

I,	(print name), agree to the above policies and pricing for
yoga with Tina Loren Yoga.	

**Client Signature** 

Date

If participant is under 18:				
As Parent or Legal Guardian of and conditions.		I conse	nt to the abov	e terms
Parent Print name:				
Parent Signature:	Date Signed:	/	/	